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CONFIRMATION NO. 8254

<b>SERIAL NUMBER</b> 10/238,958	<b>FILING OR 371(c) DATE</b> 09/11/2002 <b>RULE</b>	<b>CLASS</b> 604	<b>GROUP ART UNIT</b> 3767	<b>ATTORNEY DOCKET NO.</b> P-5295,P-5480
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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***

This appln claims benefit of 60/318,913 09/12/2001 and claims benefit of 60/318,886 09/12/2001

w 6/1/06

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

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**IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\***

10/04/2002

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature Initials	<b>STATE OR COUNTRY</b> NC	<b>SHEETS DRAWING</b> 7	<b>TOTAL CLAIMS</b> 72	<b>INDEPENDENT CLAIMS</b> 3
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**ADDRESS**

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**TITLE**

Microneedle-based pen device for drug delivery and method for using same

<b>FILING FEE RECEIVED</b> 1676	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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